

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Atty LCM-2491-52  
Dkt.**FACSIMILE CERTIFICATE**

I hereby certify that this Amendment is being transmitted by facsimile to the Patent and Trademark Office on March 10, 2008, specifically to 571-273-8300.

CANHAM et al

TC/A.U. 3738

C# M#

Serial No. 10/516,340

Examiner: Schillinger, A.M.

Filed: March 22, 2005

Date: March 10, 2008

Title: ORTHOPAEDIC SCAFFOLDS FOR TISSUE ENGINEERING

Signature

Leonard C. Mitchard  
Reg. No. 29,009

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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**CENTRAL FAX CENTER**

MAR 10 2008

No. of pages transmitted (including this cover sheet): 13 pages

Sir:

**RESPONSE/AMENDMENT/LETTER**

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ **Correspondence Address Indication Form Attached.****Fees are attached as calculated below:**

Total effective claims after amendment 0 minus highest number  
previously paid for 20 (at least 20) = 0 x \$50.00 \$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment 0 minus highest number  
previously paid for 3 (at least 3) = 0 x \$210.00 \$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add

\$370.00 (1203)/\$185.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)

One Month Extension \$120.00 (1251)/\$60.00 (2251)  
Two Month Extensions \$460.00 (1252)/\$230.00 (2252)  
Three Month Extensions \$1050.00 (1253)/\$525.00 (2253)  
Four Month Extensions \$1640.00 (1254)/\$820.00 (2254)  
Five Month Extensions \$2,230.00 (1255)/\$1115.00 (2255) \$ 1050.00  
Terminal disclaimer enclosed, add \$130.00 (1814)/\$65.00 (2814) \$

Terminal disclaimer enclosed, add

☐ Applicant claims "small entity" status. ☐ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806) \$ 0.00

Assignment Recording Fee \$40.00 (8021) \$ 0.00

Other: \$ 0.00

**TOTAL FEE \$ 1050.00**☒ **CREDIT CARD PAYMENT FORM ATTACHED.**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor  
Arlington, Virginia 22203-1808  
Telephone: (703) 816-4000  
Facsimile: (703) 816-4100  
LCM:iff

NIXON &amp; VANDERHYE P.C.

By Atty: Leonard C. Mitchard, Reg. No. 29,009

Signature: 

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